

032204

17119 U.S. PTO



**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	03560.003438
First Named Inventor or Application Identifier	
HIROTO YOSHII, ET AL.	
Express Mail Label No.	

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

- 1. ☐ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
- 2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
- 3. ☒ Specification Total Pages
- 4. ☒ Drawing(s) (35 USC 113) Total Sheets
- 5. ☒ Oath or Declaration Total Pages 
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed Statement attached deleting  
inventor(s) named in the prior application, see  
37 CFR 1.63(d)(2) and 1.33(b).
- 6. ☒ Application Data Sheet. See 37 CFR 1.76

- 7. ☐ CD-ROM or CD-R in duplicate, large table or Computer  
Program (Appendix)
- 8. ☒ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☒ paper
  - c. ☐ Statements verifying identity of above copies

17858 U.S. PTO  
10/805292



**ACCOMPANYING APPLICATION PARTS**

- 9. ☒ Assignment Papers (cover sheet & document(s))
- 10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
- 11. ☐ English Translation Document (if applicable)
- 12. ☐ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
- 13. ☐ Preliminary Amendment
- 14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- 15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
- 16. ☐ Other: \_\_\_\_\_

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No. ____/____
Prior application information: Examiner _____			Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below
---	---	--

NAME					
Address					
City	State	Zip Code			
Country	Telephone	Fax			

